## Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

<u>09/30/2010</u>	Address:	3324 Crum Road.
42F-31222		Madison, IN 47250
<u>Jefferson</u>		
ooratory Seizure (check one) nal Lab	Scizure Location (c	☐ Hotel/Motel
l/Glassware/Equipment (only) e (only)	☐ Outbuilding ☑ Vehicle	
Items Found: Location (bedroom, kitchen, open air, etc)   (check all that apply)   Lithium/Ammonia Reaction(s):   Red Phosphorous/Iodine Reaction(s):   Flammable Solvents: Open Air   Water Reactive Metal (Lithium): Open Air / Vehicle   Anhydrous Ammonia:   Hydrochloric Acid Gas Generator(s):   Corrosive Acid: Vehicle   Corrosive Base:   Other (item and location): Tubing - Residence		
age 18 discovered (check one) (number present) ort to Child Protective Services is to be faxed to the following agen	Investigative Information    Ephedrine/Pseudoephedrine Tracking Log   Retail/Merchant Tip   Other: Law Enforcement   ncies that serve the location:	
<u>.</u>		<u>73-1955</u>
	lefferson  loratory Seizure (check one)  mal Lab  Glassware/Equipment (only)  d: Location (bedroom, kitchen, open ab  t apply)  Ammonia Reaction(s):  sphorous/lodine Reaction(s):	defferson   Scizure Location (contact Seizure (check one)   Scizure Location (contact Lab   Residence   Outbuilding   Outbuild

- \*\* This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- \*\*\* This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.